

Submit 1 Copy To Appropriate District Office
District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-28141
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> SWD		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Oasis Water Solutions, LLC		6. State Oil & Gas Lease No.
3. Address of Operator Box 36 Monument, NM 88265		7. Lease Name or Unit Agreement Name MTS
4. Well Location Unit Letter <u>E</u> : 1980 feet from the <u>N</u> line and <u>510</u> feet from the <u>W</u> line Section <u>10</u> Township <u>19 S</u> Range <u>35 E</u> NMPM County <u>Lea</u>		8. Well Number <u>2</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3841.7		9. OGRID Number 310761
		10. Pool name or Wildcat Wolfcamp

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Pursuant to administration order SWD-1490, Oasis wishes to start converting the above listed well as approved. Will begin work after C-103 is approved and unit is available.

See attached

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jimmie Cooper TITLE President DATE Aug 14 2019
Type or print name Jimmie Cooper E-mail address: oasis.swd@hotmail.com PHONE: 254 493 9082
For State Use Only

APPROVED BY: Kenny Forten TITLE C.O. A DATE 8-14-19
Conditions of Approval (if any):

Attachment to C-103
Oasis Water Solutions, LLC
MTS #2

- 1) Test anchors and move in PU.
- 2) Install BOP.
- 3) Remove all rods and tubing.
- 4) Go in hole clean out well bore and perforations.
- 5) Add perfs if necessary and acidize.
- 6) Run in hole with new 3 ½ in. coated tubing and packer and set at approximately 10410 ft. or within 100 ft. top perfs.
- 7) Notify OCD and run MIT as required.
- 8) Load backside with packer fluid.
- 9) Put on injection.
- 10) File subsequent report of work performed.
- 11) File monthly C-115.